



## Borough of Beach Haven

### Special Events Policies & Application

300 Engleside Ave., Beach Haven, NJ 08008  
(609) 497-0111 FAX (609) 492-6262

Thank you for your interest in holding a special event in the Borough of Beach Haven. Attached are the materials needed to obtain approval for your upcoming event. Please follow the application directions carefully.

#### Requirements and Conditions

1. Any person wishing to sponsor a special event shall file an application and the required fees, if applicable, with the Borough Clerk at least *14 days* prior to the date of the event.
2. The special events application will be reviewed by the appropriate agencies including Police, Fire, Public Works, Land Use, and others as determined.
3. The applicant shall comply with all applicable Borough ordinances, codes, conditions, and requirements.
4. Requests for Fire and Emergency Services shall be subject to requirements and interpretive authority and discretion of the Borough.
5. Requests for Police services shall be subject to the interpretive authority and discretion of the Beach Haven Police Department.
6. Applicants must provide a Certificate of Liability Insurance listing the Borough of Beach Haven as additional insured.
7. Applicants must provide a completed Hold Harmless Agreement indemnifying the Borough of Beach Haven.
8. Applicants wishing to utilize Bicentennial Park will be required to post a non-refundable \$25 application fee as well as a \$750 refundable security deposit. The balance of the deposit shall be refundable after deducting the costs of necessary restoration expenses incurred by the Borough. Billing shall be based on a time-and-material basis. (Ch.140-1c2)

## **APPLICANT AND SPONSORING ORGANIZATION INFORMATION**

Please complete all data as required.

NAME OF ORGANIZATION: \_\_\_\_\_

Is this organization registered with the State of New Jersey as a non-profit organization?

YES

☐

NO

☐

APPLICANT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DAYTIME PHONE: (     ) \_\_\_\_\_

EVENING PHONE: (     ) \_\_\_\_\_

FAX: (     ) \_\_\_\_\_

E-MAIL: \_\_\_\_\_

MANAGER ON SITE DAY OF EVENT: \_\_\_\_\_

CELL PHONE: (     ) \_\_\_\_\_

\*Any changes in the above information, please notify the Clerk's Office immediately.

## **SPECIAL EVENT INFORMATION**

TYPE OF EVENT:

\_\_\_\_\_ RUN/WALK     \_\_\_\_\_ RALLY     \_\_\_\_\_ PARADE

\_\_\_\_\_ FAIR     \_\_\_\_\_ CONCERT     \_\_\_\_\_ PICNIC     \_\_\_\_\_ OTHER (specify)

EVENT TITLE: \_\_\_\_\_

ESTIMATED # OF PARTICIPANTS: \_\_\_\_\_ EST. # IN ATTENDANCE: \_\_\_\_\_

REQUESTED LOCATION: \_\_\_\_\_

EVENT DATE (s): \_\_\_\_\_

RAIN DATE (s): \_\_\_\_\_

TIME (s): Start \_\_\_\_\_ am / pm     Finish \_\_\_\_\_ am / pm

SET UP TIME (s): \_\_\_\_\_ am / pm - \_\_\_\_\_ am / pm

TAKE DOWN TIME (s): \_\_\_\_\_ am / pm - \_\_\_\_\_ am / pm

DESCRIPTION OF EVENT SET UP: \_\_\_\_\_

Please attach additional sheets as necessary, including plans, maps, etc.

## GENERAL EVENT INFORMATION

Is this event a fundraiser? Yes ☐ No ☐

Beneficiary: \_\_\_\_\_

Registration or Entrance Fee? Yes ☐ No ☐ \$ ☐

Food concession and/or food preparation area(s)? Yes ☐ No ☐

If you intend to cook food in the event area, please specify method:

\_\_\_\_\_ Gas \_\_\_\_\_ Electric \_\_\_\_\_ Charcoal \_\_\_\_\_ Other: \_\_\_\_\_

Will you be supplying your own First-Aid Station? Yes ☐ No ☐

Will tents be utilized for this event? Yes ☐ No ☐

How many? \_\_\_\_\_ What size? \_\_\_\_\_

Scaffolding, bleacher(s), platform(s), grandstand(s) Yes ☐ No ☐

Will a stage be utilized? Dimensions: \_\_\_\_\_ Yes ☐ No ☐

Will there be entertainment? Yes ☐ No ☐

Description: \_\_\_\_\_

Vehicle(s) and/or trailer(s) be used? Yes ☐ No ☐

How many? \_\_\_\_\_

Will there be tables and/or chairs used? Yes ☐ No ☐

How many? \_\_\_\_\_

Will fencing, barriers, and/or barricades be utilized? Yes ☐ No ☐

Does your event require electricity? Yes ☐ No ☐

Source: \_\_\_\_\_

Are street closures requested? Yes ☐ No ☐

If yes, what street? \_\_\_\_\_

Justification for street closure: \_\_\_\_\_

Will there be portable toilets? Yes ☐ No ☐

Supplier: \_\_\_\_\_

Inflatable device(s), amusement(s)? Yes ☐ No ☐

Supplier: \_\_\_\_\_

Booth(s), Exhibit(s), Display(s) and/or Enclosure(s)? Yes ☐ No ☐

Banner(s)? Yes ☐ No ☐

Will the event be advertised? How? \_\_\_\_\_ Yes ☐ No ☐

Is traffic control or crowd control necessary for this event? Yes ☐ No ☐

What is your plan for cleaning and disposing of all refuse from this event? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED ATTACHMENTS**  
**INSURANCE REQUIREMENTS**

Evidence of insurance will be required before final approval. Please provide a Certificate of Insurance, which shows a minimum of \$1 million in Commercial General Liability Insurance. Some events may require a higher limit of insurance. Additionally, permittee must list the Borough of Beach Haven as additional insured on their Certificate of Insurance. Each event is evaluated on its risk exposure.

**HOLD HARMLESS AGREEMENT**

A Hold Harmless Release Agreement must be submitted with each application. (attached)

**AFFIDAVIT OF APPLICANT**

Everything that I have stated on this application is correct to the best of my knowledge. I have read, understand, and agree to abide by the policies and rules and regulations listed on this form as they pertain to the requested usage. By signing this application, the applicant agrees to follow all rules and regulations. All programs and facilities of the Borough of Beach Haven are open to all citizens regardless of race, sex, color, religion, national origin or handicap.

NAME OF APPLICANT: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**FOR OFFICE USE ONLY**

_____ APPROVED	NOTES: _____
_____ DENIED	_____
	_____

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_